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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing
OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 60426-322; 2000P07678US01

First Named Inventor Nahata, et al

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

10929 U.S. PTO

09/875730



06/06/01

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

EFFORTLESS ENTRY SYSTEM

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable)

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/211,068	6/13/2000	
60/213,003	6/21/2000	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	024500		OR	<input type="checkbox"/> Correspondence address below
Name						
Address						
Address						
City			State		ZIP	
Country			Telephone			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) Pratik Kumar				Family Name or Surname NAHATA		
Inventor's Signature					Date May 23, 2001	
Residence: City Houston			State TX		Country U.S.	
Mailing Address 5211 Indian Shores Lane						
Mailing Address						
City		State		ZIP 77041		Country U.S.
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) Tjarko				Family Name or Surname LEIFER		
Inventor's Signature					Date	
Residence: City Stanford			State CA		Country U.S.	
Mailing Address 831 Esplanada Way						
Mailing Address						
City		State		ZIP 94305		Country U.S.
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

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Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	024500	OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Pratik Kumar		Family Name or Surname	
				NAHATA	
Inventor's Signature				Date	
Residence: City		Houston		State	TX
				Country	U.S.
Mailing Address		5211 Indian Shores Lane			
Mailing Address					
City		State		ZIP	77041
				Country	U.S.
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Tjarko		Family Name or Surname	
				LEIFER	
Inventor's Signature				Date	
<i>Tjarko Leifer</i>				June 5, 2001	
Residence: City		Stanford		State	CA
				Country	U.S.
Mailing Address		831 Esplanada Way			
Mailing Address					
City		State		Zip	94305
				Country	U.S.
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

(Page 2 of 2)

08/05/2001 10:24 FAX

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PTO/SB/02A (3-97)
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Edwin T.				LI			
Inventor's Signature						Date	5/25/01
Residence: City	Ellicott City	State	MD	Country	U.S.	Citizenship	U.S.A.
Post Office Address	10228 Little Brick House Ct.						
Post Office Address							
City	Ellicott City	State	MD	ZIP	21042	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Tejas B.				DESAI			
Inventor's Signature						Date	
Residence: City	Sterling Heights	State	MI	Country	U.S.	Citizenship	U.S.
Post Office Address	43521 Holmes Drive						
Post Office Address							
City		State		ZIP	48314-1876	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Susan A.				JOHNSON			
Inventor's Signature						Date	
Residence: City	Rochester	State	MI	Country	U.S.	Citizenship	U.S.
Post Office Address	900 E. Gunn Road						
Post Office Address							
City		State		ZIP	48306	Country	

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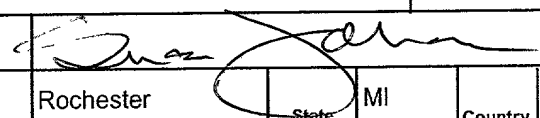
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page ____ of ____

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Edwin T.				LI			
Inventor's Signature					Date		
Residence: City		Ellicott City	State	MD	Country	U.S.	Citizenship
Post Office Address		10228 Little Brick House Ct.					
Post Office Address							
City			State		ZIP	21042	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Tejas B.				DESAI			
Inventor's Signature					Date		5/21/01
Residence: City		Sterling Heights	State	MI	Country	U.S.	Citizenship
Post Office Address		43521 Holmes Drive					
Post Office Address							
City			State		ZIP	48314-1876	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Susan A.				JOHNSON			
Inventor's Signature					Date		5/21/01
Residence: City		Rochester	State	MI	Country	U.S.	Citizenship
Post Office Address		900 E. Gunn Road					
Post Office Address							
City			State		ZIP	48306	Country

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Mark

CUTKOSKY

Inventor's
Signature

5/24/01
Date

Residence: City

Palo Alto

State

CA

Country

U.S.

Citizenship

U.S.

Post Office Address

727 Oregon Avenue

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State

ZIP

94303

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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

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Post Office Address

Post Office Address

City

State

ZIP

Country

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DECLARATION

REGISTERED PRACTITIONER
INFORMATION
(Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Laura M. Slenzak	35,363	John E. Carlson	37,794 4
Adel A. Almed	29,606	David J. Gaskey	37,139
I. Marc Asperas	37,274	William S Gottschalk	44,130
Stanton C. Braden	32,556	Kerrie A. Laba	42,777
Robert T. Canvan	37,592	Theodore W. Olds	33,080
Joseph S. Codispoti	31,819	David L. Wisz	46,350
Lawrence C. Edelman	29,299	Pasquale Musacchio	36,876
Mark H. Jay	27,507	Eric C. Swanson	40,194
Rosa S. Kim	39,728	Tracy L. Hurt	34,188
Peter A. Luccarelli, Jr.	29,750	John Musone	44,961
Jeffrey P. Morris	25,307	Karin H. Butchko	45,864
Donald B. Paschburg	33,753	John Siragusa	46,174
Darryl A. Smith	37,756	Anthony P. Cho	47,209
Daniel J. Staudt	34,733		
Heather S. Vance	39,033		
Scott T. Weingaertner	37,756		
Robert A. Whitman	36,966		
Frank J. Nuzzi	42,944		

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Variable	Mean	SD	Min	Max
Age	38.5	12.5	18	65
Gender	0.5	0.5	0	1
Marital Status	0.5	0.5	0	1
Education	12.5	2.5	9	16
Income	3500	1500	1000	8000
Health	0.5	0.5	0	1
Smoking	0.2	0.4	0	1
Alcohol	0.1	0.3	0	1
Exercise	0.3	0.5	0	1
Stress	0.4	0.5	0	1
Sleep	0.5	0.5	0	1
Diet	0.5	0.5	0	1
Work	0.5	0.5	0	1
Family	0.5	0.5	0	1
Friends	0.5	0.5	0	1
Hobbies	0.5	0.5	0	1
Travel	0.5	0.5	0	1
Religion	0.5	0.5	0	1
Politics	0.5	0.5	0	1
Environment	0.5	0.5	0	1
Technology	0.5	0.5	0	1
Art	0.5	0.5	0	1
Music	0.5	0.5	0	1
Sports	0.5	0.5	0	1
Gardening	0.5	0.5	0	1
Reading	0.5	0.5	0	1
Writing	0.5	0.5	0	1
Cooking	0.5	0.5	0	1
Cleaning	0.5	0.5	0	1
Shopping	0.5	0.5	0	1
Driving	0.5	0.5	0	1
Volunteering	0.5	0.5	0	1
Traveling	0.5	0.5	0	1
Learning	0.5	0.5	0	1
Teaching	0.5	0.5	0	1
Managing	0.5	0.5	0	1
Organizing	0.5	0.5	0	1
Planning	0.5	0.5	0	1
Executing	0.5	0.5	0	1
Evaluating	0.5	0.5	0	1
Monitoring	0.5	0.5	0	1
Controlling	0.5	0.5	0	1
Communicating	0.5	0.5	0	1
Collaborating	0.5	0.5	0	1
Networking	0.5	0.5	0	1
Presenting	0.5	0.5	0	1
Writing	0.5	0.5	0	1
Editing	0.5	0.5	0	1
Proofreading	0.5	0.5	0	1
Formatting	0.5	0.5	0	1
Designing	0.5	0.5	0	1
Illustrating	0.5	0.5	0	1
Photographing	0.5	0.5	0	1
Videoing	0.5	0.5	0	1
Audioing	0.5	0.5	0	1
Animating	0.5	0.5	0	1
Modeling	0.5	0.5	0	1
Programming	0.5	0.5	0	1
Debugging	0.5	0.5	0	1
Testing	0.5	0.5	0	1
Deploying	0.5	0.5	0	1
Maintaining	0.5	0.5	0	1
Updating	0.5	0.5	0	1
Securing	0.5	0.5	0	1
Optimizing	0.5	0.5	0	1
Monitoring	0.5	0.5	0	1
Logging	0.5	0.5	0	1
Alerting	0.5	0.5	0	1
Reporting	0.5	0.5	0	1
Archiving	0.5	0.5	0	1
Restoring	0.5	0.5	0	1
Backing up	0.5	0.5	0	1
Recovering	0.5	0.5	0	1
Deleting	0.5	0.5	0	1
Moving	0.5	0.5	0	1
Renaming	0.5	0.5	0	1
Copying	0.5	0.5	0	1
Pasting	0.5	0.5	0	1
Cutting	0.5	0.5	0	1
Undoing	0.5	0.5	0	1
Redoing	0.5	0.5	0	1
Zooming	0.5	0.5	0	1
Scrolling	0.5	0.5	0	1
Clicking	0.5	0.5	0	1
Dragging	0.5	0.5	0	1
Scrolling	0.5	0.5	0	1
Clicking	0.5			

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